



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL		Complete If Known	
Patent fees are subject to annual revision.		Application Number	09/705,929
		Filing Date	6 November 2000
		First Named Inventor	YOUNG-SUN KIM
		Examiner Name	AWAD, AMR A
		Group/Art Unit	2675
TOTAL AMOUNT OF PAYMENT (\$) <b>880.00</b>		Attorney Docket No.	P56228
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge any deficiencies:		3. ADDITIONAL FEES	
Deposit Account Number: <b>02-4943</b>		Technology Center 2600	
<input type="checkbox"/> Charge Any Additional Fee Required Under 37 C.F.R. §1.16 and 1.17.			
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
2. <input type="checkbox"/> Payment Enclosed: (CHECK#45709)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other			
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1001	770	2001	385
1002	340	2002	170
1003	530	2003	265
1004	770	2004	385
1005	160	2005	80
SUBTOTAL (1) (\$) <b>0.00</b>			
2. EXTRA CLAIM FEES			
Total claims 19 -20** = 0 x 18.00 = 0.00			
Independent Claims 4 -3** = 0 x 86.00 = 0.00			
Multiple Dependent =			
** or number previously paid, if greater; For Reissues, see below			
Large Entity Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1201	86	2201	43
1202	18	2202	9
1203	290	2203	145
1204	86	2204	43
1205	18	2205	9
SUBTOTAL (2) (\$) <b>0.00</b>			
		Large Entity Small Entity	
		Fee Code	Fee (\$)
		1051	130
		1052	50
		1053	130
		1812	2,520
		1804	920*
		1805	1,840*
		1251	110
		1252	420
		1253	950
		1254	1,480
		1255	2,010
		1401	330
		1402	330
		1403	290
		1451	1,510
		1452	110
		1453	1,330
		1501	1,330
		1502	480
		1503	640
		1460	130
		1807	50
		1806	180
		8021	40
		1809	770
		1810	770
		1801	770
		Other Fee (specify) _____	
		Other Fee (specify) _____	
		** Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3) \$ <b>880.00</b>	
SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name		Reg. Number	
Robert E. Bushnell, Esq.		27,774	
Signature		Date	
		June 16, 2004	
		Deposit Account User ID	

REB/ny

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.